

ISF026
C 06/96
R 06/05



INTEGRATED STATEWIDE INFORMATION SYSTEMS
ADVANTAGE 2.0 FINANCIAL SYSTEM (AFS)
TRAINING REQUEST FORM

TRAINEE INFORMATION (please print)

All Trainee Information Fields Must be Completed With the Exception of SSN and Special Requirements

Name: Agency #:
SSN: Agency Name:
Personnel No.: Work City:
E-mail Address: Special Requirements:
Phone:
BR Messenger Mail or Postal Mailing
Address for delivery of Self-Study Guides:
(Only required if Self-Study course selected)

*Click in the box to the right of each requested course number and the **REQUIRED** corresponding CBT.
If CBTs only are needed, please make note.*

Student will not be enrolled in Instructor Led class until CBT has been completed.

<i>Instructor Led Classes</i>		
Introduction / Chart of Accounts (1 day)	<i>Prerequisite: NAVI and DOC CBTs</i>	AFS027 / 014 / 015 <input type="checkbox"/>
Budget Control (Budget) (1 day)	<i>Prerequisite: Intro / COA</i>	AFS024 <input type="checkbox"/>
General Accounting (1 day)	<i>Prerequisite: Intro / COA, GEN CBT</i>	AFS005/016 <input type="checkbox"/>
Revenue (1/2 day)	<i>Prerequisite: Intro / COA, REV CBT</i>	AFS010/020 <input type="checkbox"/>
Payment Processing (1 day)	<i>Prerequisite: Intro / COA, PAY CBT</i>	AFS008/019 <input type="checkbox"/>
<i>Self Study Guides</i>		
Grants	<i>Prerequisite: Intro / COA, GRANTS CBT</i>	AFS026/017 <input type="checkbox"/>
Special Payment Processes	<i>Prerequisite: Intro / COA, Payment Processing</i>	AFS025 <input type="checkbox"/>

ISIS Liaison/Training Coordinator Approval	Date	Phone

For information concerning submission of completed forms: <http://www.doa.louisiana.gov/ois/service/forms/submission.htm>

For a complete description of each course: <http://www.doa.louisiana.gov/ois/service/training/courses/afsdirectory.htm>